# ORIGINAL

FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMUNICATION Washington, D.C. 20549

JUL 25 20

OMB APPROVAL
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NOTICE OF SALE OF SECURITIFICATION D, PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

FORM D

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY
Prefix Serial
DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)						
DovePort Partners, L.P. Limited Partnership Interests						
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6)	ULOE ()					
Type of Filing: New Filing Amendment	1256641					
A. BASIC IDENTIFICATION DATA	700011					
1. Enter the information requested about the issuer						
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)						
DovePort Partners, L.P.						
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)					
500 Park Lane, Marietta, Georgia 30067	678-429-1368					
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)					
(if different from Executive Offices)						
Brief Description of Business						
Securities investment fund managed by general partner and designees.	RECEIVED					
, , , , , , , , , , , , , , , , , , ,						
Type of Business Organization	ease specific JUL 2 4 2003					
corporation limited partnership, already formed other (pl	ease specify):					
business trust limited partnership, to be formed						
Month Year	10 404 KO					
Actual or Estimated Date of Incorporation or Organization: 06 03 X Actual Estim						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada; FN for other foreign jurisdiction)						

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## - Attention -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information i	transmission of the State of the American State of the St	lowing:	and Edition	Tanada, en	The state of the s		Carrier and a second	-بىدۇسىيىنى	autori matilia dei deservi di mandino e senso e dinitere minerale dalle dalle
	the issuer, if the iss	_	en organized w	dithin:	the nost five vegrs				
•					•	-6 10	10/ n= = = =	£1	
									s of equity securities of the issuer.
		•		corpo	rate general and man	naging	g partners of	r partne	ership issuers; and
<ul> <li>Each general and</li> </ul>	managing partner o	f partners)	nip issuers.						
Check Box(es) that Apply:	Promoter	□ Веп	eficial Owner		Executive Officer		Director	X	General and/or Managing Partner
Full Name (Last name first,	if individual)						<del> </del>		
DovePort Capital	LLC								
Business or Residence Addr	ess (Number and	Street, Cit	y, State, Zip Co	ode)					
500 Park Lane,	Marietta, Georgi	a 30067							
Check Box(es) that Apply:	▼ Promoter	🗴 Вел	eficial Owner	×	Executive Officer	X	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)							<del></del>	
Claugus, Thoma	as E (II)								
Business or Residence Addr		Street, Cit	y, State, Zip Co	ode)					
500 Park Lane, N	Aarietta, Georgia	30067							
Check Box(es) that Apply:	Promoter	☐ Ben	eficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Business or Residence Addre	ess (Number and	Street, Cit	y, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	☐ Ben	eficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Business or Residence Addre	ess (Number and	Street, Cit	y, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	☐ Ben	eficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)				T. (1877)				
Business or Residence Addre	ess (Number and	Street, Cit	y, State, Zip Co	ode)				<del></del> .	
Check Box(es) that Apply:	Promoter	☐ Ben	eficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)		<del></del>						
Business or Residence Addre	ess (Number and	Street, City	y, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	☐ Ben	eficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Business or Residence Addre	ess (Number and	Street, Cit	y, State, Zip Co	de)					

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1.	Was the	issuer sold	d or does th	ne issuer i	ntend to ce	II to non-s	coredited i	nvestors ir	this offer	ino?		Yes □	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Ш	$\square$				
2.	Whatis	the minim	um investn					_				¢ 100	,000*
۷,	W Hat Is	CIIC MINITE	ium mrcsin	ioni mai v	viii oc accc	pred Hom	any marvio	uaii		ct to waiv		Yes	No
3.	Does th	e offering	permit join	t ownershi	ip of a sing	le unit?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				X	
4.	commis If a pers or state:	sion or sim son to be lis s, list the na	ilar remune ted is an ass	ration for s lociated pe roker or de	solicitation erson or age ealer. If mo	of purchasent of a broker ore than fiv	ers in conne cer or deale e (5) person	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	irectly, any he offering. with a state sons of such		
Full	Name (	Last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	umber an	d Street, C	ity, State, 2	Zip Code)						
Nan	ne of As	sociated Br	oker or Dea	aler	. :								
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)	•••••••		••••		••••••••••••••••••••••••••••••		□ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full	Name (	Last name	first, if indi	vidual)			····						<del></del>
Busi	in <b>e</b> ss or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
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Mali	ic of Ass	ociated bi	UKEI OI DEZ	iici									
State			Listed Has									☐ All	l States
	AL	AK	AZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HI	ID
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (I	Last name	first, if indi	vidual)		<del></del>				<del></del>			
Busi	iness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
Nam	e of Ass	ociated Br	oker or Dea	ıler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers			···	· · · · · · · · · · · · · · · · · · ·		
	(Check	"All States	" or check	individual	States)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				***********		☐ All	l States
	AL IL	AK	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

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I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		<b>.</b>
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	s
	Equity		
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)		\$
	Total		\$ 0
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	\$0
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	,	Type of	Dollar Amount
	Type of Offering	Security NA	Sold
	Rule 505		\$NA
	Regulation A		\$NA
	Rule 504		\$NA
	Total	NA	\$NA
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$_1,000
	Legal Fees	[2]	\$ 3,000
	Accounting Fees		\$
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) blue sky filing fees		\$ 3,000
	T-4-1	<u> </u>	£ 7,000

	b. Enter the difference between the aggregate offering price given in response to Part C — Que and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted proceeds to the issuer."	ed gross		\$_99	,993,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be a each of the purposes shown. If the amount for any purpose is not known, furnish an estim check the box to the left of the estimate. The total of the payments listed must equal the adjuste proceeds to the issuer set forth in response to Part C — Question 4.b above.	ate and			
		Ö Dir	ments to officers, ectors, & filiates		ayments to Others
	Salaries and fees	🛛 <b>\$_</b>	0*	_ 🗆 \$_	0
	Purchase of real estate		0	_ 🗆 \$_	0
	Purchase, rental or leasing and installation of machinery and equipment	s_		_ 🗆 \$_	0
	Construction or leasing of plant buildings and facilities	🗆 \$	0	_ 🗆 \$_	0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		0	. 🗆 \$_	0
	Repayment of indebtedness	X \$_2	7,000	s	0
	Working capital			\$_	0
	Other (specify): purchase of portfolio securities	🗆 \$	0	. 🛭 \$_	99,966,000
		 	0	. 🗆 \$_	0
	Column Totals				
	Total Payments Listed (column totals added)		[≯] \$	99,993	,000
	reference (2008/1993) all places and the community of the		4.475	ege a nadar neka s	
sigi	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If thi nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange C information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)	Commission, u	рол writte		
	uer (Print or Type)  Signature	Date	-23	-0	 ろ
	DovePort Partners, L.P.  me of Signer (Print or Type)  Title of Signer (Print) or Type)				<u> </u>
INAI					
	Thomas E. Claugus II Manager of General Partner				

\* The general partner and its assignees will receive a quarterly cash fee in an amount equal to 0.25% of partner capital account balances and a quarterly incentive profit allocation equal to up to 20% of realized and unrealized limited partner capital account appreciation. The Issuer will also reimburse the general partner and its affiliates for approximately \$30,000 of organizational and initial offering expenses.

- ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)